PTO/SB/01 (08-03)

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DESIGN PATENT APPLICATION (37 CFR 1.63) Declaration Submitted or Subm	DECLARATION	FOR UTILI	TY OR 📙	W					
PATENT APPLICATION (37 CFR 1.63) Declaration Submitted With Initial Filling Submitted Filling Suscrbarge (37 CFR 1.16 (e)) Submitted With Initial Filling Suscrbarge (37 CFR 1.16 (e)) Frequired) I hereby declare that: Each inventor's residence, mailing address, and citizenship are as stated below next to their name. I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patient is sought on the invention entitled: Pulmonary Delivery of a Liquid Medicament Aerosol. (Title of the Invention) the specification of which I is attached hereto OR was filed on (MM/DD/YYYY) and was amended on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY) i exhowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for conshuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international fling date of the continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international fling date of the continuation-in-part application which designated at least one control unitor-in-part application on which priority is claimed. Prior Foreign Application having a filing date before that of the application on which priority is claimed.				First Named Inventor	Cowan, Ada S.				
Application Number Filing Date Submitted Art Unit Examiner Name Ex			N T						
Submitted With Initial Filling Surcharge (37 CFR 1.16 (e)) required) I hereby declare that: Each inventor's residence, mailing address, and citizenship are as stated below next to their name. I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Pulmonary Delivery of a Liquid Medicament Aerosol. (Title of the Invention) the specification of which is attached hereto OR as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY) (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including for confinuation-in-part applications, material information which became available between the filling date of the prontinuation-in-part applications, material information which became available between the filling date of the prontinuation-in-part application and the national or PCT international filling date of the continuation-in-part applications, material information which became available between the filling date of the prontinuation-in-part applications in the inventor of patent inventor's or plant breeder's rights certificate(s), or 385(a) of any PCT international application is for patent, inventor's or plant breeder's rights certificate(s), or 387(a) of any PCT international application having a filing date before that of the application on which priority is claimed. Prior Foreign Application on which priority is claimed. Prior Foreign Application on which priority is claimed. Prior Foreign Application in application in a priority is claimed. Prior Foreign Application in a priority is claimed.				Application Number					
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the specification of which I is attached hereto OR as United States Application Number or PCT International				nventor(s) of the subject	ot matter which is clair	med and for			
the specification of which I is attached hereto OR as United States Application Number or PCT International	Pulmonary Delivery of	a Liquid M	edicament Aero	osol.					
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	•	Country		Date Prior					
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.	Mulliperior	- Country	/ IAIIAII DOLI I	1401 Cla		140			
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	Additional foreign applicat	l tion numbers at	l re listed on a supple	mental priority data she	eet PTO/SB/02B attac	hed hereto.			

[Page 1 of 2]

[Fage 1 of 2]
This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/01 (06-03)
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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	Custome	r Number:			OR V	Corresp	ondence address below
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Patricia A. Coburn							
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City			State				ZIP
Columbus			Ohio	io			43215-1037
Country		Telephone			Fax		
USA		614-340-2358		614-340-2320			
I hereby declare that all stateme and belief are believed to be statements and the like so mad false statements may jeopardize	true; and fur e are punishal	ther that these sta ble by fine or impris	itements conment	were , or bo	e made with tooth, under 18 t	ne kno	wiedge that willium laise
NAME OF SOLE OR FIRST IN	VENTOR:	_	<u>petition</u> l	has be	en filed for this	unsigr	ned inventor
Given Name (First and middle [if any]) Cowan, Ada S.			-	Family Name or Surname Cowan			
Inventor's Signature Ada							Nov 26 2063
Residence: City	State		Coun	try		Citize	nship
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Mailing Address 3225 Montclair Avenue							
City	State			ZIP			Country
Lewis Center	Ohio			4303	5		USA
NAME OF SECOND INVENTO	R:					en filed	for this unsigned inventor
Given Name (first and middle [if any]) Donna T.				Family Name ស្នាក់ម្ហាname			
Inventor's Signature	T. Pa	lm					Nov 18 2003
Residence: City	State					enship	
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Mailing Address 11437 Swan Lake Drive		_					
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San Diego	California			92131		USA	
Additional inventors or a legal re	epresentative are b	peing named on the	supplem	nental si	neet(s) PTO/SB/02	A or 02LF	attached hereto.
Additional involvers a logar to	•						

PTO/SB/81 (09-03)
Approved for use through 11/30/2005. OMB 0651-0035
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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	
Filing Date	
First Named Inventor	Cowan, Ada S.
Title Pulm	nonary Delivery of a Liquid Medicament Aeroso
Art Unit	
Examiner Name	
Attorney Docket Number	

I hereby appoint:	<u></u>	-		7			
Practitioners associa	Practitioners associated with the Customer Number:						
OR	<u> </u>						
Practitioner(s) named	I below:						
	Name		Registration No	umber			
Patricia A. Coburn			28,594				
as my/our attorney(s) or age Trademark Office connected	ent(s) to prosecute the application identified therewith.	d above, and to to	ransact all business in	the United States Patent and			
	the correspondence address for the above	e-identified applic	cation to:				
The address asso	ciated with the above-mentioned Custome	r Number:					
OR ·]				
The address asso	ciated with Customer Number:						
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Address	1801 Watermark Drive, Suite 100						
City	Columbus	State	Он	Zip 43215-1037			
Country Telephone		USA Fax 614-340-2320					
I am the:	014-340-2358	614-340-2358 Fax 614-340-2320					
Applicant/Inventor.							
Assignee of record of the entire interest. See 37 CFR 3.71.							
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)							
SIGNATURE of Applicant or Assignee of Record							
Name Ada S. Cowan							
Signature Ada S. Comm							
Date Nov 26 , 200 3 Telephone 614-424-7199							
NOTE: Signatures of all the inve forms if more than one signature	entors or assignees of record of the entire intere e is required, see below*.	st or their represent	ative(s) are required. Sub	omit multiple			
*Total of2	forms are submitted.						

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PTO/SB/81 (09-03)

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Filing Date	
First Named Inventor	Cowan, Ada S.
Title	Pulmonary Delivery of a Liquid Medicame
Art Unit	
Examiner Name	
Attorney Docket Number	

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SIGNATURE of Applicant or Assignee of Record							
Name Donna T. Palmer							
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